

CLAIMS ONLY

Application Number

10781,027

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4						
5						
6						
7						
8	1					
9						
10						
11						
12						
13	1					
14						
15						
16						
17	1					
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48						
49						
50						
Total Indep	4					
Total Depend	16					
Total Claims	20					

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						